

Foster Family Home - Deficiency Report

Provider ID: 1-140010

Home Name: Lorena Kawamoto, CNA

Review ID: 1-140010-13

94-472 Alapine Street

Reviewer: Po Lim

Waipahu HI 96797

Begin Date: 10/14/2022

Foster Family Home	Required Certificate	[11-800-6]
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6.(d)(1) Comply with all applicable requirements in this chapter; and

Comment:

6.d.1. Unannounced inspection made for a 2-bed recertification. Corrective action report issued during inspection with Plan of Correction due to CTA on 11/14/2022. (30 days from the date the CCFFH is given their deficiency report).

Foster Family Home	Background Checks	[11-800-8]
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8.(a)(1) Be subject to criminal history record checks in accordance with section 846-2.7, HRS;

8.(a)(2) Be subject to adult protective service perpetrator checks if the individual has direct contact with a client; and

Comment:

8.a.1 CG#1 and CG#2 have lapse on ECRIM; CG#1 ECRIM expired on 2/1/2022 and renewed on 2/21/2022. CG#2 ECRIM expired 1/9/2022 and renewed on 2/21/2022.

8.a.1 and 8.a.2 CG#3 did not meet the 2 sets of APS, CAN, Fingerprints within the 12 months period.

Foster Family Home	Information Confidentiality	[11-800-16]
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16.(b)(5) Provide training to all employees, and for homes, other adults in the home, on their confidentiality policies and procedures and client privacy rights.

Comment:

16.b.5 CG#4 did not receive confidentiality training and missing the signed confidentiality form.

Foster Family Home - Deficiency Report

Foster Family Home

Personnel and Staffing

[11-800-41]

- 41.(b)(7) Have a current tuberculosis clearance that meets department guidelines; and
- 41.(b)(8) Have documentation of current training in blood borne pathogen and infection control, cardiopulmonary resuscitation, and basic first aid.
- 41.(c) The primary caregiver shall attend twelve hours, and the substitute caregiver shall attend eight hours, of in-service training annually which shall be approved by the department as pertinent to the management and care of clients. The primary caregiver shall maintain documentation of training received by all caregivers, in the caregiver file in the home.

Comment:

41.b.7 CG#1 TB expired on 1/29/2022, no new present for both.

41.b.8. CG#1 CPR, AED, First aid expired 9/25/2021, no new present. CG#3 First Aid expired on 8/31/2020, no present.

41.c. CG# 2 is missing 4 hours credits, CG#3 is missing 3.5 hours credits, CG#4 is missing 6 hours credits.

Foster Family Home

Fire Safety

[11-800-46]

- 46.(a) The home shall conduct, document, and maintain a record, in the home, of unannounced fire drills at different times of the day, evening, and night. Fire drills shall be conducted at least monthly under varied conditions and shall include the testing of smoke detectors.
- 46.(b)(2) All caregivers have been trained to implement appropriate emergency procedures in the event of a fire.

Comment:

46.a. And 46.b.2 No fire drill were conducted since 5/23/2021.

Foster Family Home


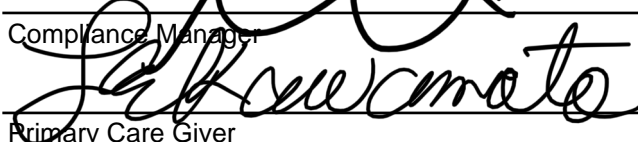
Records

[11-800-54]

- 54.(c)(5) Medication schedule checklist;

Comment:

54.c.5 Client #1 and #2 MARs were last sign out on 10/11/2022, and nothing after. Client #2 daily workflow was last sign out on 10/11/2022 and nothing after.


 Compliance Manager

 Primary Care Giver

10/17/22
 Date
 10/14/22
 Date

P-1
CTA RN Compliance Manager: Po Lim, RN

Community Care Foster Family Home (CCFFH)
Written Plan of Correction (POC)
Chapter 11-800

PCG's Name on CCFFH Certificate: Lorena Kawamoto

(PLEASE PRINT)

CCFFH Address: 94-472 Alapine St. Waipahu, HI 96797

(PLEASE PRINT)

Rule Number	Corrective Action Taken – How was each issue fixed for each violation?	Date each violation was fixed	Prevention Strategy – How will you prevent each violation from happening again in the future?
8.(a)(1)	██████████ renewed ECRIM on CG#1 & CG#2.	2/21/22	Home will use calendar to pull all due dates on to prevent them from expiring again. ECRIM checks will be done at least one month before due date to prevent future lapses.
8.(a)(2)	CG#3 submitted the missing second set of APS, CAN, Fingerprints. Document filed in home binder.	5/10/19	Home must follow the two sets of APS, CAN, Fingerprints in two successive years to avoid the same discrepancy in the future.
16.(b)(5)	CG#4 received training on confidentiality policies and procedures. Document filed in home binder.	10/16/22	Home must conduct training on confidentiality policies/procedures and client privacy rights to the newly added substitute caregiver.
41.(b)(7)	TB screening form on CG#1 was misplaced. Document filed in home binder.	1/14/22	Home must practice a habit of placing important document in home binder to avoid from future happening.
41.(b)(8)	CG#1 & CG#3 obtained CPR, AED, First Aid and placed in home binder.	10/15/22 10/18/22	Home will use iphone to schedule due dates at least 3 weeks in advance to prevent futures lapses.

☒ All items that were corrected are attached to this POC

PCG's Signature: Lorena Kawamoto

Date: 11/13/22

☒ CTA has reviewed all corrected items

CTA RN Compliance Manager: Po Lim, RN

**Community Care Foster Family Home (CCFFH)
Written Plan of Correction (POC)
Chapter 11-800**

PCG's Name on CCFFH Certificate: Lorena Kawamoto

(PLEASE PRINT)

CCFFH Address: 94-472 Alapine St. Waipahu, HI 96797

(PLEASE PRINT)

Rule Number	Corrective Action Taken – How was each issue fixed for each violation?	Date each violation was fixed	Prevention Strategy – How will you prevent each violation from happening again in the future?
41. (c)	CG#2, CG#3 & CG#4 obtained the missing hours credit. Documents filed in home binder.	10/28/22 11/02/22 11/02/22	Home will comply the adequate number of in services training for all caregivers. Home will use tally notepad to ensure the total of in-services acquired.
46.a & 46.b.2	Lapses cannot be corrected. Current fire drill filed in home binder.	10/16/22	Home must conduct monthly and timely fire drill to avoid the same problem from happening again.
54.c.5	Client#1 and #2 MARs and daily workflow were signed and placed in home binder.	10/14/22	Home must exercise a habit of signing the client's MARs and workflow/vitals after the task is done to avoid the same problem from happening in the future.

☒ All items that were corrected are attached to this POCPCG's Signature: Lorena KawamotoDate: 11/13/22☒ CTA has reviewed all corrected items